

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: FRANKLIN GROUP HOME (310153)

Address: 8104 S 35TH ST, FRANKLIN, WI 53132

License Status: REGULAR

Licensed/Certified/Registered 04/01/1993

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095675 **End Date:** 09/30/2005 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008838 Served 10/07/2005

Deficiencies Cited

83.11(3)(a)

83.32(2)(a)6

83.41(3)(a)1.a

83.41(3)(d)

Subject Area

RESPONSIBILITIES

CAPACITY FOR SELF-CARE

MINIMUM CONGREGATE LIVING AREA

ADEQUATE SPACE TO MEET RESIDENT NEEDS

Compliance
Verified

Corrected

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Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Survey ID: 0094679 End Date: 04/12/2005 Type: OTHER Purpose: COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008804 Served 05/06/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.11(3)(a)	RESPONSIBILITIES	08/15/2005	No
83.15(1)(a)	STAFFING PATTERNS	08/15/2005	Yes
83.21(4)(w)	SAFE ENVIRONMENT	08/15/2005	Yes
83.32(1)(a)	ASSESSMENT AND ISP	08/15/2005	Yes
83.32(2)(a)5	HARMFUL BEHAVIOR PATTERNS	08/15/2005	Yes
83.41(3)(d)	ADEQUATE SPACE TO MEET RESIDENT NEEDS	08/15/2005	No
83.42(3)(f)	SLEEPING HOURS EVACUATION DRILL	08/15/2005	Yes

Survey ID: 0093035 End Date: 07/19/2004 Type: OTHER Purpose: COMPLAINT/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009016 Served 08/06/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.19(1)(d)	PHYSICAL OR MENTAL CONDITION	04/12/2005	Yes
83.21(4)(g)	FAIR TREATMENT	04/12/2005	Yes
83.21(4)(w)	SAFE ENVIRONMENT	08/15/2005	Yes
83.32(2)(a)5	HARMFUL BEHAVIOR PATTERNS	08/15/2005	Yes
83.33(2)(g)3	CBRF ARRANGE HEALTH VISITS AND DOCUMENT	04/12/2005	Yes

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Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Survey ID: 0092100 **End Date:** 01/06/2004 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008671 Served 03/12/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.05(2)(e)	CLASS C SEMIAMBULATORY (CS)	04/12/2005	Yes
83.21(4)(p)	PROMPT AND ADEQUATE TREATMENT	04/12/2005	Yes
83.32(2)(d)	REVIEW OF PROGRESS	04/12/2005	Yes
83.35(1)(a)	MEET THE NUTRITIONAL NEEDS	04/12/2005	Yes
83.35(3)(a)	MENU PLANNING	04/12/2005	Yes
83.42(3)(a)1	PROCEDURES FOR ORDERLY EVACUATION	04/12/2005	Yes

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Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Enforcement History

Date: 10/05/2005 SOD #10008838 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
NO NEW ADMISSIONS
FORFEITURE---83.41(3)(a)1.a.; 83.41(3)(d)

Date: 05/05/2005 SOD #10008804 Appealed: Yes Decision: STIPULATION

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
NO NEW ADMISSIONS
FORFEITURE---83.11(3)(a)
FORFEITURE---83.15(1)(a)
FORFEITURE---83.21(4)(w)
FORFEITURE---83.32(2)(a)5
FORFEITURE---83.42(3)(f)

Date: 08/02/2004 SOD #10009016 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
FORFEITURE---83.21(4)(w)
FORFEITURE---83.32(2)(a)
FORFEITURE---83.33(2)(g)3

Date: 03/11/2004 SOD #10008671 Appealed: Yes Decision: STIPULATION

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION
FORFEITURE---83.21(4)(p)

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Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Complaint History

Date Complaint Received: 12/20/2004

Date Investigation Completed: 04/08/2005

Subject Area(s)

NUTRITION & FOOD SERVICES
ADMINISTRATION
STAFF ADEQUACY
PROGRAM SERVICES

Result

NOT SUBSTANTIATED
SUBSTANTIATED
SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

10008804
10008804

Date Complaint Received: 05/07/2004

Date Investigation Completed: 07/19/2004

Subject Area(s)

RESIDENT RIGHTS
PROGRAM SERVICES

Result

SUBSTANTIATED
SUBSTANTIATED

SOD #

10009016
10009016

Date Complaint Received: 10/22/2003

Date Investigation Completed: 01/06/2004

Subject Area(s)

SUPERVISION
RESIDENT RIGHTS

Result

NOT SUBSTANTIATED
SUBSTANTIATED

SOD #

10008671

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